



FMC029/131935

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Fitzgerald et al.

Serial No.: 09/730,414

Date Filed: December 04, 2000

For: COLLAPSIBLE BUOYANCY DEVICE
FOR RISERS ON OFFSHORE
STRUCTURES

Group No.: 3673

Examiner: Lagman, Frederick
Lyndon

Atty Docket No. FMC029/131935

RESPONSE TRANSMITTAL

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED
MAY 11 2004
GROUP 3600

1. Transmittal herewith are an amendment and associate power of attorney for this application.
2. Applicant is
 - ☐ a small entity.
 - ☒ other than a small entity

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. § 1.6(d), 1.8(a) and 1.10)

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

- ☒ deposited with sufficient postage as Express Mail receipt EV32617852545 in an envelope addressed to the following: Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: 5/4/04


Signature
Ann Razo

(type or print name of person certifying)

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. § 1.16(b)-(d)) has been calculated as shown below:

Claims Remaining After Amendment	Highest No. Previously Paid For	Extra Present	Rate	Added Fee
Total: 23	25	0	\$9/18	\$0.00
Independent: 8	8	5	\$43/86	\$0.00
First Presentation of Multiple Dependent Claims:			\$280/140	\$0.00
Total Additional Fees:				\$0.00

(complete (c) or (d), as applicable).

- ☒ No additional fee for claims is required.

OR

- ☐ Total additional fee for claims required \$ 0.00

FEE PAYMENT

5. ☒ Attached is our check in the sum of \$110.00
- ☐ Attached is our check in the sum of \$_____ for a petition to revive an application.
- ☐ Charge Account No. 50-0897 the sum of \$_____

FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Account No. 50-0897
(FMC029/131935)

AND/OR

- ☒ If any additional fee for claims is required, charge Account No. 50-0897
(FMC029/131935)

Date: MAY 4, 2004



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